## PART B - FEE(S) TRANSMITTAL

## Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or <u>Fax</u> (571)-273-2885

appropriate. All further indicated unless correcte maintenance fee notificate	correspondence includired below or directed oth tions.	or transmitting the is ng the Patent, advance nerwise in Block 1, by	e orders and notification of y (a) specifying a new corre	maintenance fees we espondence address;	rill be m and/or (	ailed to the current b) indicating a separ	correspondence address as rate "FEE ADDRESS" for	
CURRENT CORRESPONDI 490	ENCE ADDRESS (Note: Use BI		Fee par	(c) Transmittal Thi	s certific l paper, s	ate cannot be used for such as an assignmen	domestic mailings of the or any other accompanying at or formal drawing, must	
VIDAS, ARRETT & STEINKRAUS, P.A. SUITE 400, 6640 SHADY OAK ROAD EDEN PRAIRIE, MN 55344				Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.				
							(Depositor's name)	
							(Signature)	
							(Date)	
APPLICATION NO. FILING DATE			FIRST NAMED INVENTOR	₹	ATTORNEY DOCKET NO.		CONFIRMATION NO.	
10/696,845	10/696,845 10/29/2003		Stephen P. Mangin		S63.2B-15374-US01		9143	
APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	OR GUIDING DEPLOYME:  PUBLICATION FEE DUE	PREV. PAID ISSUE		TOTAL FEE(S) DUE	DATE DUE	
				\$0	5 1 1515			
nonprovisional	NO	\$1510	\$300	\$0 •		\$1810	10/11/2011	
EXAMINER		ART UNIT	CLASS-SUBCLASS	_				
PRONE, CHRISTOPHER D		3738	623-001110					
<ul> <li>1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).</li> <li>□ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.</li> <li>☑ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.</li> </ul>			(1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.  1 Vidas, Arrett & Steinkraus  2					
			N THE PATENT (print or ty nee data will appear on the p		aa ie ida	ntified below the do	cument has been filed for	
recordation as set forth	h in 37 CFR 3.11. Comp	pletion of this form is I	NOT a substitute for filing an	assignment.			edificit has been fried for	
(A) NAME OF ASSIC			(B) RESIDENCE: (CITY and STATE OR COUNTRY)					
Boston Scie	entific Scimed, In	nc.	Maple Gr	ove, MN				
Please check the appropri	iate assignee category or	categories (will not be	e printed on the patent):	Individual 🛚 Co	rporation	n or other private gro	up entity Government	
4a. The following fee(s) are submitted:  Issue Fee Publication Fee (No small entity discount permitted) Advance Order - # of Copies			A check is enclosed.  Payment by credit ca  The Director is hereb	b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)  A check is enclosed.  Payment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form).				
a. Applicant claims	<b>tus</b> (from status indicated s SMALL ENTITY statu	is. See 37 CFR 1.27.	☐ b. Applicant is no lor	0			(0) ( )	
NOTE: The Issue Fee and interest as shown by the r	d Publication Fee (if requeecords of the United Sta	uired) will not be acce tes Patent and Tradem	pted from anyone other than ark Office.	the applicant; a regis	stered att	orney or agent; or the	e assignee or other party in	
Authorized Signature	/James M. Urze	Date October 5, 2011						
Typed or printed name	e James M. Urze		Registration No. 48596					
This collection of inform an application. Confident submitting the completed this form and/or suggesti	ation is required by 37 C tiality is governed by 35 I application form to the ons for reducing this bu	CFR 1.311. The inform U.S.C. 122 and 37 Cl USPTO. Time will v rden, should be sent to	ation is required to obtain or FR 1.14. This collection is es ary depending upon the indi the Chief Information Offic	retain a benefit by the stimated to take 12 novidual case. Any cover, U.S. Patent and	ne public ninutes to mments Tradema	which is to file (and o complete, including on the amount of tin rk Office, U.S. Depa	by the USPTO to process) g gathering, preparing, and he you require to complete rtment of Commerce, P.O.	

Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.